



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3290

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------------|
| SERIAL NUMBER 10/811,396 | FILING DATE 03/26/2004 RULE | CLASS 362 | GROUP ART UNIT 2875 | ATTORNEY DOCKET NO. 386998050US |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------------|

APPLICANTS

Shih-Yuan Chang, Taipei City, TAIWAN;

** CONTINUING DATA *****
U R

** FOREIGN APPLICATIONS *****
W AT

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 06/07/2004

| | | | | | |
|---|---|-------------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY TAIWAN | SHEETS DRAWING 8 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 3 |
|---|---|-------------------------------|------------------------|-----------------------|----------------------------|

Verified and Acknowledged
 Examiner's Signature _____ Initials _____

ADDRESS
 25096
 PERKINS COIE LLP
 PATENT-SEA
 P.O. BOX 1247
 SEATTLE, WA
 98111-1247

TITLE
 Light collector for an LED array

| | | |
|-----------------------------------|---|--|
| FILING FEE RECEIVED 385 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ |
|-----------------------------------|---|--|